

214442

RECOMMENDATION FOR HONOR OR MERIT AWARD

DATE

29 November 1961

TO: Honor and Merit Awards Board

FROM: (Operating official)

Jacob D. Esterline

C/WH/OPS

Section A

Personal Data

1. NAME OF PERSON RECOMMENDED (Last, First, Middle) ⁰³ XXXXXXXXXXXX [Emilio A. Rodriguez]		2. POSITION TITLE Contract Agent	3. GRADE 12-13 Equiv. -	4. SD -
5. OFFICE OF ASSIGNMENT WH		6. STATION HEADQUARTERS <input checked="" type="checkbox"/> FIELD (Specify location) Miami, Fla.		
7. HOME ADDRESS (No., St., City, Zone, State) Miami, Florida		8. OFFICE EXT. (If hqs.)	9. CITIZENSHIP AND HOW ACQUIRED U.S. thru naturalization	
10. RECOMMENDED AWARD Intnl. Medal of Merit			11. POSTHUMOUS YES <input type="checkbox"/> NO <input checked="" type="checkbox"/>	
12. NAME OF NEXT OF KIN		13. RELATIONSHIP	14. HOME ADDRESS (No., St., City, Zone, State)	
			15. HOME PHONE	

Section B Recommendation for Award for Heroic Action or Acceptance of Hazard

6. WERE YOU AN EYEWITNESS TO THE ACT		YES <input type="checkbox"/>	NO <input checked="" type="checkbox"/>
Personnel in immediate vicinity or who assisted in act or shared in same hazard:			
17. FULL NAME	18. ORGN. TITLE	19. GRADE	20. OFFICE OF ASSIGNMENT
List any of the above persons given an award or recommended for award for participating in act:			
1. FULL NAME	22. TYPE OF AWARD		
Conditions under which act was performed:			
23. LOCATION Cuba	24. INCLUSIVE DATES Apr. 60 - June 61	25. TIME OF DAY all hours	
26. PREVAILING GEOGRAPHIC CONDITIONS AND OBSTACLES ENCOUNTERED			

Section C Recommendation for Award for Achievement, Service, or Performance

27. DO YOU HAVE PERSONAL KNOWLEDGE OF THE SERVICE OR PERFORMANCE		YES <input checked="" type="checkbox"/>	NO <input checked="" type="checkbox"/>
28. OFFICIAL ASSIGNMENT AT TIME OF SERVICE OR PERFORMANCE [Organizing of staybehind net] 24			
29. COMPONENT OR STATION (Designation and location) Cuba			
30. DUTIES AND RESPONSIBILITIES [Collection of info thru net operation] 24			
Personnel who assisted or contributed substantially to the service or performance			
31. FULL NAME	32. ORGN. TITLE	33. GRADE	34. OFFICE OF ASSIGNMENT
List any of the above persons given an award or recommended for award for participating in the performance			
35. FULL NAME	36. TYPE OF AWARD		
37. INCLUSIVE DATES FOR WHICH RECOMMENDED Jan. 61 - June 61	38. ASSIGNMENT COMPLETED YES <input checked="" type="checkbox"/> NO <input type="checkbox"/>		39. NOW IN SAME OR RELATED ASSIGNMENT YES <input checked="" type="checkbox"/> NO <input type="checkbox"/>

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